

SERIAL NUMBER 09/027,670		FILING DATE 02/23/98	CLASS 600	GROUP ART UNIT 3736	ATTORNEY DOCKET NO. 5051-418	
APPLICANT	JIM E. RIVIERE, RALEIGH, NC; TOMAS MARTIN-JIMENEZ, CARY, NC; RONALD E. BAYNES, CARY, NC; ARTHUR L. CRAIGMILL, OREGON HOUSE, CA.					
	**CONTINUING DOMESTIC DATA***** VERIFIED  _____					
	**371 (NAT'L STAGE) DATA***** VERIFIED  _____					
	**FOREIGN APPLICATIONS***** VERIFIED  _____					
FOREIGN FILING LICENSE GRANTED 04/21/98 ***** SMALL ENTITY *****						
Foreign Priority claimed 35 USC 119 (a-d) conditions met		<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY NC	SHEETS DRAWING 10	TOTAL CLAIMS 50
Verified and Acknowledged Examiner's Initials _____ Initials _____						INDEPENDENT CLAIMS 3
ADDRESS	SEE CUSTOMER NUMBER: 020792					
	METHODS, SYSTEMS AND PRODUCTS FOR DETERMINING DRUG WITHDRAWAL INTERVALS					
TITLE						
FILING FEE RECEIVED  \$790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

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09/027,670	02/23/98	600	3736	5051-418

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	<b>**CONTINUING DOMESTIC DATA*****</b> VERIFIED  <u>                    </u>
	<b>**371 (NAT'L STAGE) DATA*****</b> VERIFIED  <u>                    </u>
	<b>**FOREIGN APPLICATIONS*****</b> VERIFIED  <u>                    </u>
IF REQUIRED, FOREIGN FILING LICENSE GRANTED 04/21/98 ** SMALL ENTITY **	

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	<u>                    </u> Examiner's Initials	NC	10	50	3

ADDRESS	SEE CUSTOMER NUMBER: 020792

TITLE	METHODS, SYSTEMS AND PRODUCTS FOR DETERMINING DRUG WITHDRAWAL INTERVALS

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